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PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	November 20, 2001
First Named Inventor	John Zachariassen
Title	System and Method for Transmitting Goods, Remuneration, and Information
Group Art Unit	
Examiner Name	
Attorney Docket Number	3199 0003

I hereby appoint:

☒ Practitioners at Customer Number

27886

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Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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State

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Country

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Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

John Zachariassen

Signature

Date

Nov. 11 - 2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 4 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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SIGNATURE of Applicant or Assignee of Record

Name

Rayan Zachariassen

Signature

Date

November 12, 2001

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☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Carrie Liddy

Signature

Carrie Liddy

Date

Nov. 12/01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number

Filing Date

November 20, 2001

First Named Inventor

John Zachariassen

Title

System and Method for Transmitting Goods,
Remuneration, and Information

Group Art Unit

Examiner Name

Attorney Docket Number

3199 0003

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☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Margaret Hurley

Signature

Margaret Hurley

Date

12 Nov. 01

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☒ *Total of 4 forms are submitted.

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number 3199 0003

First Named Inventor John Zachariassen

COMPLETE IF KNOWN

Application Number

Filing Date

11/21/2001

Art Unit

Examiner Name

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SYSTEM AND METHOD FOR TRANSMITTING GOODS, REMUNERATION, AND
INFORMATION

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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DECLARATION — Utility or Design Patent ApplicationDirect all correspondence to: ☒ Customer Number **27886** OR ☐ Correspondence address below**Name****Address****City****State****ZIP****Country****Telephone****Fax**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR : ☐ A petition has been filed for this unsigned inventor**Given Name** John
(first and middle [if any])**Family Name** ZACHARIASSEN
or Surname**Inventor's
Signature**Nov. 11, 2001
DateToronto
Residence: CityOntario
StateCanada
CountryDanish
Citizenship

99 Harbour Square, Apt. 3008

Mailing AddressToronto
CityOntario
StateM5J 2H2
ZIPCanada
Country**NAME OF SECOND INVENTOR:** ☐ A petition has been filed for this unsigned inventor**Given Name** Rayan
(first and middle [if any])**Family Name** ZACHARIASSEN
or Surname**Inventor's
Signature**Nov. 12, 2001
DateToronto
Residence: CityOntario
StateCanada
CountryDanish
Citizenship

500 Queens Quay West, Suite 602W

Mailing AddressToronto
CityOntario
StateM5V 3K8
ZIPCanada
Country☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet**
Page 1 of 1**Name of Additional Joint Inventor, if any:**☐ A petition has been filed for this unsigned inventorCarrie
Given
NameLIDDY
Family Name
or SurnameInventor's
Signature*C. Liddy*

Date

*Nov. 12/01*Toronto
Residence: CityOntario
StateCanada
CountryCanadian
Citizenship36 Humberview Drive
Mailing Address

Mailing Address

City Toronto

Ontario
StateL4H 1B1
ZIPCanada
Country**Name of Additional Joint Inventor, if any:**☐ A petition has been filed for this unsigned inventorMargaret
Given
NameHURLEY
Family Name
or SurnameInventor's
Signature*Margaret H. Hurley*

Date

*12 Nov. 01*Toronto
Residence: CityOntario
StateCanada
CountryAmerican
Citizenship2606-400 Walmer Road
Mailing Address

Mailing Address

City Toronto

Ontario
StateM5P 2X7
ZIPCanada
Country**Name of Additional Joint Inventor, if any:**☐ A petition has been filed for this unsigned inventorGiven
NameFamily Name
or SurnameInventor's
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

Mailing Address

City

State

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Country

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